<u>-</u>									. Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO												,	1	
Effective October 1, 2000									09832898 /20 6006/162					
CLAIMS AS FILED - PART I									SMALL ENTITY				THAN	
(Column 1) (Column 2)									TYPE		OR	OTHER SMALL		
TOTAL CLAIMS				19				F	RATE	FEE	1	RATE	FEE	
FOR				NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS				/9 minus 20=		· 0		Ţ,	X\$ 9=		OR	X\$18=)	
INDEPENDENT CLAIMS				3 minus 3 =		. 6		-	X40=		OR	X80=	_	
MU	LTIPLE DEPEN	DENT	CLAIM PI	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	7/1)		
CLAIMS AS AMENDED - PART II												OTHER		
(Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OR	SMALL			
AMENDMENT A		REA	Laims Maining Fter Noment		NUA PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	17	Minus	••	20	=	,	(\$ 9=		OR	X\$18=		
AME	Independent FIRST PRESE	NTATE	<u>2</u>	Minus		<u>3</u>	-		K40=		OR	X80=		
Ц	rinal Prese	NIKIF	ON OF M	OCTIFICE DE	C				135=		OR	+270=		
	B			9-24			-of	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE			
	(Column 1) (Column 2) (Column 3)								MI. PEE		• •	NULLI I. PEE		
		CLAIMS	AIMS	(c) (c)	HIG	HEST				ADDI-	1		ADDI-	
AMENDMENT 6		AFTER AMENDMENT			PREV	ABER OUSLY FOR	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL	
	Total	•	17	Minus	. 6	20	- 1	,	(\$ 9≠		OR	X\$18=		
AME	Independent	• NTATE	3	Minus	PENDEN	S TCLANA	<u> -/</u>	3	(40=		OR	X80=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM '								135=		OR	+270=	7	
9/26/05 ADD									TOTAL		OR	TOTAL		
									#1. PEE			ADDII. PEEI	7	
		C	AIMS		HG	EST	(Column 3)	-	-	ADDI-			1001	
AMENOMENT C		REMAINING AFTER AMENDMENT			PREVI	IBER OUSLY FOR	PRESENT EXTRA	B	PATE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total		17	Minus		20	s —	×	\$ 9=		OR	X\$18=		
	Independent	Ŀ	3	Minus	***	3	-	×	(40=		OR	_X80⇒		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM,										<u>-</u> Γ			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=	·	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE											OR	TOTAL ADDIT, FEE		
	if the "Highest Nur The "Highest Nur	mber Pri	reviously Pa	id For (Total o	is SPACE r Independ	rs less the Sent) is the	in 3, enter "3." i highest rumbe			propriate box				

FORM PTO-878 (Rev. 8/00)

Palent and Trademark Office, U.S. DEPARTMENT OF COMMERCE